



WEBINAR

CAH Conditions of Participation 2022

(W2006-W2010 – Jan-Feb 2022)

Dates: **Tuesdays (January 25; February 1, 8, 15, 22)**

Time: **9:00 – 11:00 a.m. CT**

Speaker:

Laura A. Dixon, BS, JD, RN, CPHRM, President
Healthcare Risk Education and Consulting, LLC

Cost: \$800 to NHA members for the full series (per hospital, no charge for additional lines, recordings available up to 60 days after the webinar); \$195 per session if registered separately.

Target Audience

Chief Executive Officer, Chief Operating Officer, Chief Nursing Officer, Compliance Officer, Joint Commission Coordinator, Quality Improvement personnel, Risk Manager, Legal Counsel

Course Curriculum

This five-part webinar series will cover the entire Critical Access Hospital (CAH) Conditions of Participation (CoP) manual from the Centers for Medicare & Medicaid Services (CMS). It is a great way to educate everyone in your hospital on all the sections in the CMS hospital manual, especially ones that apply to their department. Attendees will learn how to do a gap analysis to increase compliance, and we will discuss common areas of deficiency. The fifth session will also delve more deeply into the Quality Assurance & Performance Improvement (QAPI) worksheet and program requirements.

There were over 700 pages of regulations for Critical Access Hospitals (CAHs) in 2020. In addition to several important memos regarding COVID-19, there were changes to discharge planning, antibiotic stewardship program, access to medical

records, infection control, QAPI, policy review time frames, emergency preparedness, credentialing of the dietician, quality and appropriateness of the diagnosis, changes to the swing bed requirements, life safety code and facility services, and revised emergency preparedness requirements.

Learning Objectives

At the conclusion of this session, participants should be able to:

Part 1:

- Describe methods to find information on CMS regulations
- Recall the process to identify common deficiencies cited by CMS
- Discuss recommendations to do a gap analysis to ensure compliance with all the hospital CoPs
- Identify changes to CMS CoP manual within the last 3 years

Part 2:

- Explain the responsibilities of the pharmacists that include developing, supervising, and coordinating activities of the pharmacy
- Describe the requirements for CAH to monitor and inspect to ensure that outdated drugs are not available for patient use
- Recall the requirements for security and storage of medications, medication carts and anesthesia carts
- Recall the requirements for nursing services and order sets, and protocols
- Discuss the requirement to have a list of do not use abbreviations and a review of sound alike/look alike drugs

Part 3:

- Recall that the infection preventionist must be appointed by the board
- Recall that CMS has an infection control worksheet that may be helpful to CAHs
- Discuss proper insulin pens usage
- Describe that an order is needed to allow the patient to self-administer medications
- Explain that there are three-time frames in which to administer medications
- Discuss what CMS requires for discharge planning

Part 4:

- Explain the informed consent elements required by CMS
- Describe the requirements for history and physicals for CAH
- List what must be contained in the operative report

- Discuss what the CAH must do to comply with the requirements for notification of the organ procurement (OPO) agency when a patient expires
- Recall that CMS has many patient rights that are afforded to patients in swing beds
- Recall that hospitals must have a visitation policy and patients must be informed

Part 5:

- Recall that CMS has a worksheet on QAPI
- Describe that there is a section on QAPI in the CMS hospital CoP manual that any hospital that accepts Medicare or Medicaid reimbursement must follow
- Discuss the rewritten the QAPI requirements CMS implemented for CAHs
- Discuss the Governing Board's ultimately responsible for the QAPI program and must ensure there are adequate resources for PI
- Recall that hospitals are receiving a high number of deficiencies in QAPI

Speaker Bio

Laura A. Dixon is the president of Healthcare Risk Education and Consulting. She previously served as the Director, Facility Patient Safety and Risk Management and Operations for COPIC from 2014 to 2020. In her role, Ms. Dixon provided consultation and training to facilities, practitioners and staff in multiple states.

Ms. Dixon has more than twenty years of clinical experience in acute care facilities, including critical care, coronary care, peri-operative services and pain management. Prior to joining COPIC, she served as the Director, Western Region, Patient Safety and Risk Management for The Doctors Company, Napa, California. In this capacity, she provided consultation to the physicians and staff for the western United States.

As a registered nurse and attorney, Laura holds a Bachelor of Science degree from Regis University, a Doctor of Jurisprudence degree from Drake University College of Law, and a Registered Nurse Diploma from Saint Luke's School Professional Nursing. She is licensed to practice law in Colorado and California.

This speaker has no real or perceived conflicts of interest that relate to this presentation.